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CONFIRMATION NO. 8536

Bib Data Sheet

SERIAL NUMBER 09/881,858	FILING DATE 06/15/2001 RULE	CLASS 455	GROUP ART UNIT 2684	ATTORNEY DOCKET NO. 7217/64725
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** CONTINUING DATA *A.P. NO* *****

** FOREIGN APPLICATIONS *A.P. YES* *****
 JAPAN P2000-182092 06/16/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 08/03/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 1
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35 USC 119 (a-d) conditions met
☒ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials *A.P.*

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TITLE
 A PORTABLE TELEPHONE HAVING HIERARCHICALLY STRUCTURED MENUS OF EXECUTING FUNCTIONS

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)